Special Education Coding Criteria 2006/2007

ECS to Grade 12

Mild/Moderate (including Gifted and Talented)

Severe

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This document is intended for:

Teachers	✓
Administrators	✓

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Introduction

Alberta Education provides programming support and funding to school authorities to develop and implement special education programming for ECS children and grade 1 to 12 students. *Special Education Coding Criteria 2006/2007* outlines criteria within specific categories to help school authorities identify those children and students who require special education programming. Each category is given a code for the purpose of reporting special education data to Alberta Education. A child or student must meet the criteria in order to be assigned a special education code.

The need for special education may be determined at any time. The process of identifying such need focuses on the impact of the child or student's functioning in an educational environment. This is accomplished through:

- a comprehensive, individualized assessment
- a specialized assessment completed every two to five years
- an individualized program plan (IPP) with the involvement of the parent(s) and school personnel
- an annual review of functioning and programming.

Some children and students do not meet the criteria for special education coding but may still benefit from special education programming. They are not assigned a code or reported to Alberta Education.

For further information, refer to:

- *Standards for Special Education (2004)*
- *Standards for the Provision of Early Childhood Special Education (2006)*
- *Requirements for Special Education in Accredited Funded Private Schools (2006)*

Mild/Moderate including Gifted and Talented (ECS to Grade 12)

MILD COGNITIVE DISABILITY (ECS: Code 30; Grades 1–12: Code 51)
A student/ ECS child identified as having a mild cognitive disability should have:

- an intelligence quotient (IQ) in the range of 50 to 75 ± 5 as measured on an individual intelligence test,
- an adaptive behaviour score equivalent to the mildly delayed level on an adaptive behaviour scale such as AAMR Adaptive Behaviour Scale – School: Second Edition (ABS-S:2) or Vineland Adaptive Behaviour Scale, and exhibit developmental delays in social behaviours, and
- a demonstrated delay in most academic subjects and social behaviours as compared to his or her same-age peers.

MODERATE COGNITIVE DISABILITY (ECS: Code 30; Grades 1–12: Code 52)
A student/ECS child identified as having a moderate cognitive disability should have:

- an intelligence quotient (IQ) in the range of approximately 30 to 50 ± 5 as measured on an individual intelligence test,
- an adaptive behaviour score equivalent to the moderately delayed level on an adaptive behaviour scale such as AAMR Adaptive Behaviour Scale – School: Second Edition (ABS-S:2) or Vineland Adaptive Behaviour Scale, and
- programming that reflects significant modifications to basic curriculum and instruction in literacy, numeracy and living/vocational skills.

EMOTIONAL/BEHAVIOURAL DISABILITY (ECS: Code 30; Grades 1–12: Code 53)
A student/ECS child identified with a mild to moderate emotional/behavioural disability exhibits chronic and pervasive behaviours that interfere with the learning and safety of the student/child, other students/children and staff.

Typically, behaviour disabilities are characterized by a number of observable maladaptive behaviours:

a) an inability to establish or maintain satisfactory relationships with peers or adults
b) a general mood of unhappiness or depression
c) inappropriate behaviour or feelings under ordinary conditions
d) continued difficulty in coping with the learning situation in spite of remedial intervention
e) physical symptoms or fears associated with personal or school problems
f) difficulties in accepting the realities of personal responsibility and accountability
g) physical violence toward other persons and/or physical destructiveness toward the environment.

LEARNING DISABILITY (Grades 1–12: Code 54)

This is the official definition adopted by the Learning Disabilities Association of Canada (LDAC) on January 30, 2002.

"Learning Disabilities" refer to a number of disorders which may affect the acquisition, organization, retention, understanding or use of verbal or nonverbal information. These disorders affect learning in individuals who otherwise demonstrate at least average abilities essential for thinking and/or reasoning. As such, learning disabilities are distinct from global intellectual deficiency.

Learning disabilities result from impairments in one or more processes related to perceiving, thinking, remembering or learning. These include, but are not limited to: language processing; phonological processing; visual spatial processing; processing speed; memory and attention; and executive functions (e.g., planning and decision-making).

Learning disabilities range in severity and may interfere with the acquisition and use of one or more of the following:

- oral language (e.g., listening, speaking, understanding)
- reading (e.g. decoding, phonetic knowledge, word recognition, comprehension)
- written language (e.g., spelling and written expression)
- mathematics (e.g., computation, problem solving).

Learning disabilities may also involve difficulties with organizational skills, social perception, social interaction and perspective taking. Learning disabilities are lifelong. The way in which they are expressed may vary over an individual's lifetime, depending on the interaction between the demands of the environment and the individual's strengths and needs. Learning disabilities are suggested by unexpected academic under-achievement or achievement which is maintained only by unusually high levels of effort and support.

Learning disabilities are due to genetic and/or neurobiological factors or injury that alters brain functioning in a manner which affects one or more processes related to learning. These disorders are not due primarily to hearing and/or vision problems, socio-economic factors, cultural or linguistic differences, lack of motivation or ineffective teaching, although these factors may further complicate the challenges faced by individuals with learning disabilities. Learning disabilities may co-exist with various conditions including attentional, behavioural and emotional disorders, sensory impairments or other medical conditions.

For success, individuals with learning disabilities require early identification and timely specialized assessments and interventions involving home, school, community and workplace settings. The interventions need to be appropriate for each individual's learning disability subtype and, at a minimum, include the provision of:

- specific skill instruction
- accommodations
- compensatory strategies
- self-advocacy skills.

HEARING DISABILITY (ECS: Code 30; Grades 1–12: Code 55)
A student/ECS child identified with a mild to moderate hearing disability is one whose hearing condition:

- affects speech and language development and
- interferes with the ability to learn.

A student/child with mild (26 to 40 decibels) to moderate (41 to 70 decibels) hearing disability will have an average hearing loss of 26 to 70 decibels unaided in the better ear over the normal range of speech. The normal range of speech is between 500 Hz and 4000 Hz.

VISUAL DISABILITY (ECS: Code 30; Grades 1–12: Code 56)
A student/ECS child identified with a mild to moderate visual disability is one whose vision is so limited that it interferes with the ability to learn and requires modification of the learning environment. A student/child who is designated as having limited vision should have a visual acuity of less than 20/70 (6/21 metric) in the better eye after correction and/or a reduced field of vision.

COMMUNICATION DISABILITY/DELAY (ECS: Code 30)
A child identified with a mild to moderate communication disability/delay is one who:

- has a diagnosed mild or moderate disability/delay in expressive and/or receptive language; or
- has a diagnosed disability/delay in articulation, phonology, voice and/or fluency and is at risk for learning difficulties as demonstrated by education-based assessments, which may include tests of phonological awareness.

COMMUNICATION DISABILITY (Grades 1–12: Code 57)
A student identified with a communication disability communicates ineffectively with peers and adults because of a diagnosed mild to moderate disability in:

- expressive and/or receptive language, and/or
- articulation, phonology, voice and/or fluency.

PHYSICAL OR MEDICAL DISABILITY (ECS: Code 30; Grades 1–12: Code 58)
A student/ECS child identified with a mild to moderate physical or medical disability is one whose physical, neurological or medical condition interferes with the ability to learn and requires modification of the learning environment. The existence of a physical disability or medical condition, in and of itself, is not sufficient for the student/child to be designated in this category.

MULTIPLE DISABILITY (ECS: Code 30; Grades 1–12: Code 59)
A student/ECS child identified with a multiple disability has two or more non-associated mild to moderate disabilities which have a significant impact upon his or her ability to learn. Some disabling conditions are closely associated so would not be designated under this category. For example, students/children with hearing disabilities frequently have communication disabilities, and students/children with cognitive disabilities almost always have both academic and communication disabilities.

GIFTED AND TALENTED (ECS to Grade12: Code 80)
Giftedness is exceptional potential and/or performance across a wide range of abilities in one or more of the following areas:

- general intellectual
- specific academic
- creative thinking
- social
- musical
- artistic
- kinesthetic.

For further explanations regarding these areas, refer to *Teaching Students Who Are Gifted and Talented*, Book 7 of the *Programming for Students with Special Needs* series, pages 18–19. The resource can be purchased from the Learning Resources Centre at www.lrc.education.gov.ab.ca.

Severe (ECS to Grade 12)

SEVERE COGNITIVE DISABILITY (Code 41)
A student/child with a severe cognitive disability is one who:

- has severe delays in all or most areas of development
- frequently has other associated disabilities including physical, sensory, medical and/or behavioural
- requires constant assistance and/or supervision in all areas of functioning including daily living skills and may require assistive technology
- should have a standardized assessment, which indicates functioning in the severe to profound range (standardized score of 30 ± 5 or less). Functional assessments by a qualified professional will also be considered in cases where the disabilities of the student/ECS child preclude standard assessments
- has scores equivalent to the severe to profound levels on an adaptive behavioural scale (e.g., AAMR Adaptive Behaviour Scales-School: Second Edition (ABS-S:2); Vineland Adaptive Behaviour Scales; Scales of Independent Behaviour - Revised).

SEVERE EMOTIONAL/BEHAVIOURAL DISABILITY (Code 42)
A student/child with a severe emotional/behavioural disorder is one who:

- displays chronic, extreme and pervasive behaviours and requires close and constant adult supervision, high levels of structure, and other intensive support services in order to function in an educational setting. The behaviours significantly interfere with both the learning and safety of the student/ECS child and other students/ECS children. For example, the student/child could be dangerously aggressive and destructive (to self and/or others), violent and/or extremely compulsive; and
- (for grade 1–12 students) has a diagnosis including conduct disorder, schizophrenia or bi-polar disorder, obsessive/compulsive disorders, or severe chronic clinical depression; and may display self-stimulation or self-injurious behaviour. In the most extreme and pervasive instances, severe oppositional defiant disorder may qualify; or
- (for ECS children) has either a diagnosis or a statement by a qualified professional indicating that the child experiences severe behavioural difficulties.

A clinical diagnosis within the last 2 years of a severe emotional/behavioural disorder by a psychiatrist, registered psychologist or a developmental pediatrician is required, in addition to extensive documentation of the nature, frequency and severity of the disorder by school authorities. In the case of an ECS child who is not currently placed in an educational environment, extensive documentation of the nature, frequency, and severity of the disorder by the referring specialist may suffice. The effects of the disability on the student's/ECS child's functioning in an education setting should be described. An ongoing treatment plan/behaviour plan should be available and efforts should be made to ensure that the student/ECS child has access to appropriate mental health and therapeutic services.

A clinical diagnosis of a severe emotional/behavioural disorder is not necessarily sufficient to qualify under this category. Some diagnoses with behavioural components that are not sufficient to qualify are: attention-deficit/hyperactivity disorder (ADHD), attention deficit disorder (ADD).

Note: Students/ECS children diagnosed with fetal alcohol spectrum disorder (FASD) in the most severe cases should be reported under Code 44 rather than Code 42.

SEVERE MULTIPLE DISABILITY (Code 43)

A student/child with multiple disabilities is one who:

- has two or more non-associated moderate to severe cognitive and/or physical disabilities that, in combination, result in the student functioning at a severe to profound level; and
- requires significant special programming, resources and/or therapeutic services.

Students/ECS children with a severe disability and another associated disability should be identified under the category of the primary severe disability. For example:

- A student/ECS child with a severe cognitive disability and another associated disability is not designated under this category, but is designated under severe cognitive disability.
- A student/ECS child with a severe emotional/behavioural disability and another associated disability is not designated under this category, but is designated under severe emotional/ behavioural disability.

The following mild or moderate disabilities cannot be used in combination with other disabilities to qualify under Code 43:

a) attention deficit/hyperactivity disorder (ADHD) (ECS to Grade 12)
b) emotional/behavioural disabilities (ECS to Grade 12)
c) learning disability (LD) (Grades 1 to 12 only)
d) speech and language-related disabilities (ECS to Grade 12).

NOTE: ECS children diagnosed with Down syndrome in the most severe cases should be reported under Severe Multiple Disability (Code 43).

SEVERE PHYSICAL OR MEDICAL DISABILITY (Code 44)
A student/child with a severe physical, medical or neurological disability, including autism, is one who:

a) has a medical diagnosis of a physical disability, specific neurological disorder or medical condition which creates a significant impact on the student's/ECS child's ability to function in the school environment (note: some physical or medical disabilities have little or no impact upon the student's/ECS child's ability to function in the school environment); and
b) requires extensive adult assistance and modifications to the learning environment in order to benefit from schooling.

A student/ECS child with severe autism (or other severe pervasive developmental disorder) is included in this category. A clinical diagnosis by a psychiatrist, registered psychologist, or medical professional specializing in the field of autism is required. A clinical diagnosis of autism is not necessarily sufficient to qualify under this category. Eligibility is determined by the functioning level of the student/ECS child with autism.

In order for a diagnosis of autism to be made, the student/ECS child needs to demonstrate impairment in

- social interaction and
- communication, and
- exhibit stereotyped pattern of behaviour (e.g., hand flapping, body rocking, echolalia, insistence on sameness and resistance to change).

A student/ECS child diagnosed with severe fetal alcohol spectrum disorder (FASD) may have fetal alcohol syndrome (FAS) or alcohol-related neurodevelopmental disorder (ARND) and is included in this category. A clinical diagnosis by a psychiatrist, registered psychologist with specialized training, or medical professional specializing in developmental disorders is required. A clinical diagnosis of FASD is not necessarily sufficient to qualify under this category. Eligibility is determined by the functioning level of the student/ECS child with FASD. Students/ECS children with severe FASD who exhibit significant impairment in the areas of social functioning, life skills, behaviour, learning, attention and concentration will need extensive intervention and support.

DEAFNESS (Code 45)
A student/child with a severe to profound hearing loss is one who:

a) has a hearing loss of 71 decibels (dB) or more unaided in the better ear over the normal speech range (500 to 4000 Hz) that interferes with the use of oral language as the primary form of communication, or has a cochlear implant preceded by a 71 dB hearing loss unaided in the better ear; and
b) requires extensive modifications and specialized educational supports; and
c) has a diagnosis by a clinical or educational audiologist. New approvals require an audiogram within the past 3 years.

If a student/ECS child has a severe to profound sensorineural hearing loss that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of deafness outlining the severity of the hearing

loss and modifications to the learning environment may be sufficient to support eligibility.

BLINDNESS (Code 46)
A student/child with severe vision impairment is one who:

a) has corrected vision so limited that it is inadequate for most or all instructional situations, and information must be presented through other means; and
b) has a visual acuity ranging from 6/60 (20/200) in the better eye after correction, to having no usable vision or a field of vision reduced to an angle of 20 degrees.

If a student/ECS child has a severe to profound visual impairment that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of vision outlining the severity of the disability and modifications to the learning environment may be sufficient to support eligibility.

For those students/ECS children who may be difficult to assess (e.g., cortical blindness – developmentally delayed), a functional visual assessment by a qualified specialist in the field of vision or a medical professional may be sufficient to support eligibility.

SEVERE DELAY INVOLVING LANGUAGE (Code 47) – For ECS children only.
A child with a severe delay involving language is one who has difficulty communicating with peers and/or adults because of a severe delay in expressive, receptive or total language. Please use the following criteria for determining eligibility in this category:

a) A child who has sufficient communication ability to permit formal speech/language assessment should demonstrate results less than or equal to the first percentile in expressive, receptive or total language. If formal language assessment is not possible, a parental report measure and/or observational measure may be used; or
b) A child who has a severe phonological delay and at least a moderate expressive, receptive or total language delay (on a formal assessment of language); or
c) A child who has at least a moderate to severe expressive, receptive or total language delay (on a formal assessment of language) and at least a moderate to severe delay in one or more of the following areas of development: fine motor, gross motor, vision, hearing.

Alberta Education criteria for a severe delay involving language are based on a child's developmental profile, not on individual subtest scores in any single area of development. Eligibility documentation must include an assessment completed by a speech and language pathologist that includes the results of measures used and a description of the child's communicative ability. In order to qualify, the language delays must have a significant impact on such areas as functional language, social use of language, vocabulary, language concepts, mean length of utterance, grammar, and acquisition of early literacy. If the child qualifies on the basis of a language delay in combination with delays in other areas, those areas of delay must be assessed by an appropriate specialist and must result in a significant impact on the child's ability to function in an ECS environment.

Assessment reports that were completed within six months of the day the child begins his/her program must be submitted to Special Programs Branch for pre-approval of the child's eligibility or with the Program Unit Funding (PUF) application.

Clustering must be the first option considered when planning programs for these children. In most cases, a 475 hour program is sufficient.

Children with moderate to severe disabilities/delays in two or more non-associated areas (not including language) should be considered under Code 43.